## PART B - FEE(S) TRANSMITTAL

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7590

04/11/2008

Ingrid McTaggart 3021 S.E. 56TH AVE. Portland, OR 97206

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Inarid McTaggart	(Depositor's name
World Milaggait	(Signature
4-24-20080	(Date

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/647,690	08/25/2003	Kathryn Thompson	ТН0600	3275
FITLE OF INVENTION: A	RTISTS EASEL			
		•		

APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$720	\$300	\$0	\$1020	07/11/2008
· EXAMINER		ART UNIT	CLASS-SUBCLASS	]	•	
WOOD, KIMBERLY T 3632		3632	248-449000	04/29/2008 EAREGAY2 00003006 10647690		
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.		(1) the names of up to or agents OR, alternativ (2) the name of a singl registered attorney or a	gle firm (having as a member a r agent) and the names of up to tomeys or agents. If no name is		M. Taggar	
	less an assignee is ident th in 37 CFR 3.11. Comp		THE PATENT (print or type data will appear on the put of a substitute for filing an (B) RESIDENCE: (CITY	•		ument has been filed for

PLEASE NOTE: Unless an assignee is identified below, no assignee recordation as set forth in 37 CFR 3.11. Completion of this form is	nee data will appear on the patent. If an assignee is identified below, the document has been filed for NOT a substitute for filing an assignment.		
(A) NAME OF ASSIGNEE	(B) RESIDENCE: (CITY and STATE OR COUNTRY)		
Please check the appropriate assignee category or categories (will not b	e printed on the patent):		
4a. The following fee(s) are submitted:  ☐ Issue Fee ☐ Publication Fee (No small entity discount permitted) ☐ Advance Order - # of Copies	4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed.  Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).		
5. Change in Entity Status (from status indicated above)  a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.	☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).		
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Authorized Signature (Massid MC)	aut Date 4-14-1008		

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